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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

	FOI AII A	utilorizea Collili	nuee		(Office Use Only	
1. NAME OF COMMITTEE (in full)	USE FEC MAILI OR TYPE OR PI		ample:If typing, ty er the lines	ype			
Regula for Congress Comn	nittee	1 1 1 1 1 1					
1		1 1 1 1 1 1 1					1
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ADDRESS (number and street)	1	19					
Check if different than previously reported. (ACC)	Alexandria				VA	22314	
2. FEC IDENTIFICATION NUM	IBER ▼	CITY 🛋		S	TATEA	ZIP COI	DE ▲ E ♥ DISTRICT
C00005041		3. IS THIS REPORT	X NEW (N)	or [AMENDI (A)		16
4. TYPE OF REPORT (Co. (a) Quarterly Reports: X April 15 Quarterly Fig. 15 Quarterl		(b) 12-Day PRE	E-Election Repor Primary (12P) Convention (1		General (12		Runoff (12R)
October 15 Quarte		Election on				in the State	of
January 31 Year-E	nd Report (YE)	(c) 30-Day PO \$	ST-Election Repo	ort for the:			
Termination Report	t (TER)	Election on	General (30G		Runoff (30F	in the	Special (30S)
5. Covering Period 0 1	0 1	2008	through	03	3 1	2008	
I certify that I have examined this I Type or Print Name of Treasurer	Report and to the Lisa Lis	_	e and belief it is t	true, correct a	nd complete.		
	nically Filed by	Lisa Lisker	subject the perso	Da		1 4 enalties of 2 U.S	2 0 0 8 .C 437g.
Office Use Only FE5AN018						FEC FOR (Revised 02/2	

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003) Page 2 Write or Type Committee Name Regula for Congress Committee ° D 0 1 03 0 1 2008 2008 Report Covering the Period: 3 1 From: To: **COLUMN A COLUMN B This Period Election Cycle-to-Date** Net Contributions (other than loans) (a) Total Contributions 0.00 267603.00 (other than loans) (from Line 11(e))..... (b) Total Contribution Refunds 200.00 0.00 (from Line 20(d))..... (c) Net Contributions (other than loans) -200.00 267603.00 (subtract Line 6(b) from Line 6(a))....... 7. Net Operating Expenditures (a) Total Operating Expenditures 3693.05 240754.32 (from Line 17)..... (b) Total Offsets to Operating 0.00 211.16 Expenditures (from Line 14)..... (c) Net Operating Expenditures 3693.05 240543.16 (subtract Line 7(b) from Line 7(a))....... Cash on Hand at Close of 124610.20 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 10773.08 Schedule C and/or Schedule D).....

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530

Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003) Page 3 Write or Type Committee Name Regula for Congress Committee ° D 0 1 2008 03 2008 0 1 Report Covering the Period: From: To: 3 1 **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 238222.00 (i) Itemized (use Schedule A)..... 0.00 23381.00 (ii) Unitemized..... (iii) TOTAL of contributions 0.00 261603.00 from individuals..... 0.00 0.00 (b) Political Party Committees..... (c) Other Political Committees 0.00 6000.00 (such as PACS)..... 0.00 0.00 (d) The Candidate..... (e) TOTAL CONTRIBUTIONS (other than loans) 0.00 267603.00 (add Lines 11(a)(iii), (b), (c), and (d)) 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES..... 13. LOANS (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 0.00 0.00 (b) All Other Loans..... (c) TOTAL LOANS 0.00 0.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 211.16 (Refunds, Rebates, etc.).... 15. OTHER RECEIPTS 0.00 6039.56 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...... 0.00 273853.72

FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

COLUMN A COLUMN B II. DISBURSEMENTS Total This Period Election Cycle-to-Date 3693.05 240754.32 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES..... 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of all Other Loans..... (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other 0.00 0.00 Than Political Committees..... 0.00 0.00 (b) Political Party Committees..... (c) Other Political Committees 200.00 0.00 (such as PACs)..... (d) TOTAL CONTRIBUTION REFUNDS 200.00 0.00 (add Lines 20(a), (b), and (c))..... 2090.00 27516.00 21. OTHER DISBURSEMENTS..... 22. TOTAL DISBURSEMENTS 5983.05 268270.32 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 130593.25 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 0.00 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)..... 130593.25 25. SUBTOTAL (add Line 23 and Line 24)..... 5983.05 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 124610.20 (subtract Line 26 from Line 25).....

BB&T

City

Mailing Address

Washington

Candidate Name

Office Sought:

Mailing Address

Washington

Income Tax

Candidate Name

Office Sought:

State:

Purpose of Disbursement

State:

BB&T

City

Bank Fees

Purpose of Disbursement

A.

В.

C.

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

NAME OF COMMITTEE (In Full) Regula for Congress Committee

Full Name (Last, First, Middle Initial)

1909 K St., NW

House

Senate

District:

Full Name (Last, First, Middle Initial)

President

1909 K St., NW

House

Senate

District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

Full Name (Last, First, Middle Initial)

President

FOR LINE NUMBER: PAGE 5/17 Use separate schedule(s) (check only one) for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee Transaction ID: SB17.12089 Date of Disbursement 16 o 1 2008 State Zip Code Amount of Each Disbursement this Period DC 20006 20.00 001 Refund or Disposal of Excess Contributions Required Under Category/ 11 C.F.R. 400.53 Type Disbursement For: General Primary Other (specify) Transaction ID: SB17.12070 Date of Disbursement 0 3 2008 State Zip Code Amount of Each Disbursement this Period 20006 DC 409.47 001 Refund or Disposal of Excess Contributions Required Under Category/ 11 C.F.R. 400.53 Type Disbursement For: Primary General Other (specify) Transaction ID: SB17.12011 Date of Disbursement 2008 State Zip Code Amount of Each Disbursement this Period NC 28258 673.00

BB&T Bankcard Corporation Mailing Address PO Box 580363 City Charlotte Purpose of Disbursement See Memos 001 Refund or Disposal of Excess Contributions Required Under Category/ Candidate Name 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate X Primary General President Other (specify) State: District:

FE5AN018

1102.47

FOR LINE NUMBER: (check only one) PAGE 6/17 Use separate schedule(s) for each category of the Detailed Summary Page

or commercial					for the purpose of soliciting contributions
NAME OF COMN		ng the name and addre	ss of any political	committee to so	olicit contributions from such committee
	gress Committee				
Tiegula IOI OOI					
•	First, Middle Initial)				Transaction ID: SB17.12011.0
Congressional	Club				Date of Disbursement
Mailing Address	2001 New Ham	npshire AVE NW			01 1 1 7 2 0 0 8
City Washington		State DC	Zip Code 20009-3484		Amount of Each Disbursement this Perio
Purpose of Disbu	rcomont	DC	20009-3464		480.00
Donor Gift Purcha	ase			001	Refund or Disposal of Excess
Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Office Sought:	House	Disbursement For:	2008		[MEMO ITEM]
	Senate	X Primary	General		
State:	President District:	Other (spe	ecify) 🔻		
•	First, Middle Initial) Iistorical Associati	on			Transaction ID: SB17.12011.1 Date of Disbursement
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Washington		DC	20090-6586		
Purpose of Disbu	rsement			•	193.00
Office supplies				001	Refund or Disposal of Excess Contributions Required Under
Candidate Name				Category/ Type	11 C.F.R. 400.53
Office Sought:	House	Disbursement For:	<u> </u> 2008	. , , , ,	[MEMO ITEM]
	Senate	X Primary	General		
	President	Other (spe	ecify) 🔻		
State:	District:				
•	First, Middle Initial)				Transaction ID: SB17.12030
BB&T Bankcar	d Corporation				Date of Disbursement
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Purpose of Disbu See memos	rsement			001	278.27
Candidate Name				001 Category/	Refund or Disposal of Excess Contributions Required Under
Caracato Harrio				Type	11 C.F.R. 400.53
Office Sought:	House Senate	Disbursement For: Primary	General		
State:	President District:	Other (spe	есіту) 🔻		
Olaio.	District.				
					278.27

SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 7/17 Use separate schedule(s) (check only one) for each category of the 17 18 19a 19b 20a 20b 20c 21

ITEMIZED DISBURSEMENTS Detailed Summary Page Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Regula for Congress Committee Full Name (Last, First, Middle Initial) Transaction ID: SB17.12030.0 A. Speedway Gasoline #1153 Date of Disbursement 0 2 2008 Mailing Address 2920 12th ST NW City State Zip Code Amount of Each Disbursement this Period OH 44708 Canton 32.02 Purpose of Disbursement Travel 002 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] Office Sought: Disbursement For: House Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.12030.1 В. Post Office Canton Date of Disbursement 0 2 2008 Mailing Address 2650 Cleveland AVE NW City State Zip Code Amount of Each Disbursement this Period 44711-9900 Canton OH 205.00 Purpose of Disbursement Postage 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.12036 C. Capitol Hill Club Date of Disbursement 2008 Mailing Address 300 First Street SE City State Zip Code Amount of Each Disbursement this Period Washington DC 20003 72.50 Purpose of Disbursement Meeting Expense 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 72.50 SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)

FOR LINE NUMBER: (check only one) PAGE 8/17 Use separate schedule(s) for each category of the

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<u>/</u>	Regula for Congress Committee												
	Full Name (Last, First, Middle Initial)									_	B17.1	206	4
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	President	Other (sp											
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	Senate President	Primary Other (sp	General ecify)										
	State: District:		,, v										
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SII	IBTOTAL of Disbursements This Page (optional)				▶			_				9	948.85

A.

В.

C.

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

NAME OF COMMITTEE (In Full) Regula for Congress Committee

Full Name (Last, First, Middle Initial)

House Members' Dining Room

Capitol BLDG Room H118

> House Senate

House

Senate

Senate

District:

President

District:

Full Name (Last, First, Middle Initial)

President

804 Wales RD NE

District:

Full Name (Last, First, Middle Initial)

Johnny's Half Shell

Purpose of Disbursement Meeting Expense

Mailing Address

Washington

Candidate Name

Office Sought:

Marathon Gasoline

Mailing Address

State:

President

400 N. Capital St., NW

Mailing Address

Washington

Candidate Name

Office Sought:

State:

City

Purpose of Disbursement Meeting Expense

City

FOR LINE NUMBER: PAGE 9/17 Use separate schedule(s) (check only one) for each category of the 17 18 19b **Detailed Summary Page** 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee Transaction ID: SB17.12049.1 Date of Disbursement 0 2 2 Ŏ 2008 Zip Code State Amount of Each Disbursement this Period DC 20515 18.90 001 Refund or Disposal of Excess Contributions Required Under Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] Disbursement For: Primary General Other (specify) Transaction ID: SB17.12049.2 Date of Disbursement 0 2 2 Ŏ 2008 State Zip Code Amount of Each Disbursement this Period 20001 DC 595.60 001 Refund or Disposal of Excess Contributions Required Under Category/ 11 C.F.R. 400.53 Туре [MEMO ITEM] Disbursement For: General Primary Other (specify) Transaction ID: SB17.12049.3 Date of Disbursement 2 Ŏ 2008 Amount of Each Disbursement this Period 32.39

City	State	Zip Code	
Massillon	ОН	44646	
Purpose of Disbursement			
Travel			002
Candidate Name			Category/
			Type
Office Sought: House	Dishursement For:		•

Primary

Other (specify)

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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SUBTOTAL of Disbursements This Page (optional)	•								0.0)0	
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General

State:

FOR LINE NUMBER: (check only one) PAGE 10/17 Use separate schedule(s) for each category of the Detailed Summary Page X 17 18 19a 19l 20a 20b 20c 21

NAN	ME OF COMM	IITTEE (In Full)				
Reg	gula for Con	gress Committee				
	Name (Last, F eedway Gas	First, Middle Initial) oline #1153				Transaction ID: SB17.12049.4 Date of Disbursement
Mail	ling Address	2920 12th ST N	IW			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Car	nton		State OH	Zip Code 44708		Amount of Each Disbursement this Perio
Purp	pose of Disbur vel	rsement			002	42.60 Refund or Disposal of Excess
Can	ndidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	ice Sought:	House Senate President	Disbursement For: Primary Other (sp	General ecify) ▼		INITINIO II EIVIJ
Stat Full		District: First, Middle Initial)				Transaction ID: SB17.12076
	ase Card Se	•				Date of Disbursement
Mail	ling Address	PO Box 15153				03 7 27 7 2008
City Wil	, Imington		State DE	Zip Code 19886		Amount of Each Disbursement this Period
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	ndidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Offic	ice Sought:	House Senate President	Disbursement For: Primary Other (sp	General ecify) ▼		
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	ndidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Offic	ice Sought:	House Senate President	Disbursement For: Primary Other (sp	General ecify) ▼		[MEMO ITEM]
Stat	te:	District:				
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FOR LINE NUMBER: (check only one) PAGE 11 / 17 Use separate schedule(s) for each category of the

				Detailed	Summary Page			Х	17 20a	\dashv	18		19a 20c		19b 21
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/ F 	Regula for Cor	ngress Committee													
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	State:	District:													
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FOR LINE NUMBER: (check only one) PAGE 12/17 Use separate schedule(s) for each category of the Detailed Summary Page 17 18 19a 19b 20a 20b 20c 21

NAME OF COMMITTEE (In Full) Regula for Congress Committee		
Full Name (Last, First, Middle Initial) MCI		Transaction ID: SB17.12068 Date of Disbursement
Mailing Address PO BOX 591		03 / 11 / 2008
City State Zip Coo Leesburg VA 20178		Amount of Each Disbursement this Pe
Purpose of Disbursement Telephone	001	44.03 Refund or Disposal of Excess
Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Office Sought: Senate President State: Disbursement For: Primary Other (specify) Other (specify) ■	eneral	
Full Name (Last, First, Middle Initial) MCI		Transaction ID: SB17.12074 Date of Disbursement
Mailing Address PO BOX 591		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & O & N \\ Y & Z & O & O & N \end{bmatrix}$
City State Zip Coo Leesburg VA 20178		Amount of Each Disbursement this Pe
Purpose of Disbursement Telephone	001	Refund or Disposal of Excess
Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53
President Other (specify) ▼	eneral	
Full Name (Last, First, Middle Initial)		Transaction ID: SB17.12042
Post Office Navarre		Date of Disbursement
Mailing Address 33 Canal ST W		$\begin{bmatrix} 0 & 2 & 0 & 0 \\ 0 & 2 & 0 & 0 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 & 0 \\ 0 & 2 & 0 & 0 & 0 \end{bmatrix}$
City State Zip Coo Navarre OH 44662		Amount of Each Disbursement this Pe
Purpose of Disbursement PO Box Rental	001	68.00
Candidate Name	001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
President Other (specify) ▼	eneral	
State: District:		
UBTOTAL of Disbursements This Page (optional)		156.06

A.

В.

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

NAME OF COMMITTEE (In Full) Regula for Congress Committee

Full Name (Last, First, Middle Initial)

33 Canal ST W

House

Senate

House

Senate

Ciuca Mistalla Issisial

President

District:

District:

President

District:

Full Name (Last, First, Middle Initial)

Stark County Republican Party

President

115 Dewalt Ave NW

Post Office Navarre

Purpose of Disbursement

Mailing Address

PO Box Rental

Office Sought:

Mailing Address

State:

City

Canton

Event Tickets

Candidate Name

Office Sought:

C. II Niama / Last

State:

Candidate Name

City

Navarre

FOR LINE NUMBER: PAGE 13/17 Use separate schedule(s) (check only one) for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee Transaction ID: SB17.12044 Date of Disbursement 2 Ŏ 0 2 2008 State Zip Code Amount of Each Disbursement this Period OH 44662-9998 104.00 001 Refund or Disposal of Excess Contributions Required Under Category/ 11 C.F.R. 400.53 Type Disbursement For: General Primary Other (specify) Transaction ID: SB17.12072 Date of Disbursement 0 3 2008 State Zip Code Amount of Each Disbursement this Period 44702 OH 150.00 001 Refund or Disposal of Excess Contributions Required Under Category/ 11 C.F.R. 400.53 Type Disbursement For: Primary General Other (specify) Transaction ID: SB17.12062 Date of Disbursement 2 8ั 2008

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\sim										

Verizon North

Purpose of Disbursement

Mailing Address PO Box 920041

City State Zip Code Dallas TX 75392 Purpose of Disbursement Telephone 001 Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General

Amount of Each Disbursement this Period

85.19

Refund or Disposal of Excess Contributions Required Under

11 C.F.R. 400.53

339.19 SUBTOTAL of Disbursements This Page (optional) \blacktriangleright TOTAL This Period (last page this line number only)

Other (specify)

State:

SCHEDULE B (FEC Form 3)

FOR LINE NUMBER:

	EMIZED DISBURSEMENT	Use separate schedule(s)	FOR LINE NUMBER: PAGE 14/17
	for commercial purposes, other than using		d by any person for the purpose of soliciting contributions I committee to solicit contributions from such committee
	NAME OF COMMITTEE (In Full) Regula for Congress Committee		
•	Full Name (Last, First, Middle Initial) Verizon North		Transaction ID: SB17.12082 Date of Disbursement 0 3 M / D 2 7 / Y Y O 0 8
	Mailing Address PO Box 920041		
	City Dallas	State Zip Code TX 75392	Amount of Each Disbursement this Period 91.12
	Purpose of Disbursement Telephone Candidate Name		001 Category/ Type Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: Senate President State: District:	Disbursement For: Primary General Other (specify) ▼	
	Full Name (Last, First, Middle Initial) Wayne County Republican Party		Transaction ID: SB17.12066 Date of Disbursement
	Mailing Address 667 Dennis Circle)	03
	City Smithville	State Zip Code OH 44677	Amount of Each Disbursement this Period
	Purpose of Disbursement Event Tickets		90.00 Refund or Disposal of Excess
	Candidate Name		Category/ Type Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
	State: District:		

 		181 12
SUBTOTAL of Disbursements This Page (optional)		181.12
TOTAL This Period (last page this line number only)	•	3277.01

State:

A.

SCHEDULE B (FEC Form 3)

District:

FOR LINE NUMBER: PAGE 15 / 17 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 18 19b **Detailed Summary Page** 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Regula for Congress Committee Full Name (Last, First, Middle Initial) Transaction ID: SB20C.12022 TUESDAY GROUP POLITICAL ACTION COMMITTEE Date of Disbursement 24 o[™] 1 2008 Mailing Address PO BOX 40385 City State Zip Code Amount of Each Disbursement this Period WASHINGTON DC 20016 200.00 Purpose of Disbursement Contribution Refund 010 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: 2008 House X Primary General Senate President Other (specify)

SUBTOTAL of Disbursements This Page (optional)	•	200.00
TOTAL This Period (last page this line number only)	<u> </u>	200.00

FOR LINE NUMBER: PAGE 16/17 Use separate schedule(s) (check only one) for each category of the Detailed Summary Page

						20a	20b	20c	χ 21		
			and Statements may n								
$ \ \ \ \ \ \ \ \ \ \ \ \ \ $	NAME OF COM	MITTEE (In Full)									
	Regula for Co	ngress Committee									
Α.	Full Name (Last, First, Middle Initial) Orville Boy's & Girls Club Mailing Address 820 N Ella						Transaction ID: SB21.12087 Date of Disbursement M 3 M / D 2 B / Y 2 0 0 8 Y				
	City Orville		State OH	Zip Code 44667		Amount	t of Each D	isbursem	ent this Period	_ 1	
	Purpose of Disbu Charitable Contri	012	90.00 Refund or Disposal of Excess								
	Candidate Name	ı			Category/ Type		tributions F C.F.R. 400.		Jnder		
	Office Sought: State:	House Senate President District:	Disbursement For: Primary Other (spe	General ecify) ▼							
В.	Full Name (Last, First, Middle Initial) SCHURING FOR CONGRESS COMMITTEE					Transaction ID: SB21.12026 Date of Disbursement					
	Mailing Address 400 MARKET AVE NORTH SUITE 400						2 4	J L	2008		
	City CANTON		State OH	Zip Code 44702		Amount	t of Each D		ent this Period	7	
	Purpose of Disbursement Contribution				011	2000.00 Refund or Disposal of Excess Contributions Required Under					
	Candidate Name KIRK SCHURING				Category/ Type	11 (Jnder				
	Office Sought:	X House Senate President	Disbursement For: X Primary Other (spe	2008 General							
	State: OH	District: 16									

SUBTOTAL of Disbursements This Page (optional)	•	2090.00
TOTAL This Period (last page this line number only)	•	2090.00

PAGE 17 / 17 SCHEDULE D (FEC Form 3) (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Regula for Congress Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Accounting/Compliance Services Huckaby Davis Lisker Mailing Address 228 S. Washington St., Ste. 115 City State ZIP Code Alexandria 22314 VA Outstanding Balance Beginning This Period Transaction ID: SD10.11886 1544.64 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 948.16 0.00 2492.80 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Web Hosting/Design/Storage WRL Advertising Mailing Address 4470 Dressler RD NW State ZIP Code City Canton ОН 44718-2716 Outstanding Balance Beginning This Period Transaction ID: SD10.11891 8280.28 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 8280.28 10773.08 1) SUBTOTALS This Period This Page (optional)..... 10773.08 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

10773.08

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)